## TOWN OF LA POINTE ASHLAND COUNTY, WISCONSIN

Date	File #	

## PETITION FOR AMENDMENT OF ZONING MAP CHANGE

Initiator of Petition		
Address		
Authorized Agent		
(Proof of Authorization Must Accompany Petition)		
Land Parcel Number		
Legal Description		
Description of Proposed Changes		
	erty location, shapes and dimensions of existing and proposed rection and any other information pertinent to this petition.	
Signature of Petitioner Date		_
	Date Auditor	
Date of Zoning & Planning Public Hearing	ing	
Date of Zoning & Planning Meeting		
Date passed by the Town Board		
Amendment Accepted by the County Board Denied	d on	
Signature of Zoning Administrator	Date	

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## **INSTRUCTIONS**

■ Application is to reflect that the applicant has provided an updated listing of the owners of all lands within 300 feet of any part of the land included in all requests for a Zoning Map Change.

An original, completed application and fifteen (15) copies must be submitted.

■ Fee is \$500.00